2005 ACTIVE MONTHLY INSURANCE RATES

EMPLOYER					
	Health	Tricare Supplement	Dental	Life	LTD
Employee Only	221.58	63.50	11.71	.35	3.23
Employee/Spouse	431.60	122.50	11.71	.35	3.23
Employee/Child	312.60	122.50	11.71	.35	3.23
Full Family	503.46	163.50	11.71	.35	3.23

HEALTH EMPLOYEE						
	Savings	Standard	Companion	Cigna	MUSC	Tricare Supplement
Employee Only	9.28	93.46	101.58	97.80	99.02	0.00
Employee/Spouse	72.56	237.50	309.24	296.66	288.40	0.00
Employee/Child	20.28	142.46	226.36	216.36	190.34	0.00
Full Family	108.56	294.58	464.00	445.34	374.00	0.00

DENTAL EMPLOYEE			
	Basic	Plus	
Employee Only	0.00	17.50	
Employee/Spouse	7.64	33.14	
Employee/Child	13.72	36.16	
Full Family	21.34	51.80	

DEPENDENT LIFE		
10,000	1.32	

SUPPLEMENTAL LTD				
AGE	90 DAY	180 DAY		
< 31	0.00077	0.00059		
31 – 40	0.00105	0.00081		
41 – 50	0.00210	0.00161		
51 – 60	0.00423	0.00326		
61 – 65	0.00509	0.00392		
> 65	0.00621	0.00478		

STEPS TO CALCULATE SLTD MONTHLY PREMIUM

- 1. Always select floating decimal (F) on your calculator.
- 2. Divide gross annual salary by 12 to determine monthly salary.
- 3. Multiply monthly salary by rate factor from table.
- 4. Drop digits to right of 2 decimal places; do not round.
- 5. If number is even, this is the monthly premium.

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